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Patent Attorney's Docket No. <u>019519-348</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Pate	ent Application of)			
Nobuyuki KITA et al.) Group Art Unit: 1752			
Application No.: 10/052,355) Examiner: Barbara Lee Gilliam			
Filed: J	anuary 23, 2002) Confirmation No.: 5391			
	ROCESSES FOR PRODUCING ITHOGRAPHIC PRINTING PLATE)))			
	AMENDMENT/REPLY	TRANSMITTAL LETTER RECEIVED			
Commiss	ioner for Patents	DEC 0 8 2003			
P.O. Box Alexandr	: 1450 ia, VA 22313-1450	TC 1700			
Sir:					
Encl	osed is a reply for the above-identified pa	atent application.			
[X]	A Petition for Extension of Time is also enclosed.				
[]	A Terminal Disclaimer and the [] \$55.00 (2814) [] \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.				
[X]	Also enclosed is/are Submission of Certified Copy of Priority Document				
[]	Small entity status is hereby claimed.				
[]	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the [] \$385.00 (2801) [] \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).				
	[] Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.				
	[] Applicant(s) previously submitted requested.	, on, for which continued examination is			
	does not exceed three months from	of action by the Office until at least, which in the filing of this RCE, in accordance with led fee under 37 C.F.R. § 1.17(i) is enclosed.			

(10/03)

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- [] A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.
- [X] No additional claim fee is required.
- [] An additional claim fee is required, and is calculated as shown below:

	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADD'L FEE
Total Claims		MINUS =		× \$18.00 (1202) =	
Independent Claims		MINUS =		× \$86.00 (1201) =	
If Amendment adds mul	tiple depend	ent claims, add \$290	0.00 (1203)		
Total Claim Amendmen	t Fee				
If small entity status is o	claimed, sub	tract 50% of Total C	Claim Amendn	nent Fee	

[] A check in the amount of \$	is enclosed for the fee due.				
[] Charge \$to Deposit Account N	o. 02-4800.				
The Director is hereby authorized to charge any	appropriate fees under 37 C.F.R. §§ 1.16				
1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to					
Deposit Account No. 02-4800. This paper is submit	ted in duplicate.				

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: November 28, 2003

Robert G. Mukai

Registration No. 28,531

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620